

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

1 Filer ID (Ethics Commission Filers) 00018800		2 Total pages filed: 101		OFFICE USE ONLY	
3 COMMITTEE NAME Republican Executive Committee of Comal County		4 TREASURER NAME Highfield, Vicki		Date Received ELECTRONICALLY FILED 01/01/2026	
5 ORIGINAL REPORT TYPE <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election		<input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer resignation <input type="checkbox"/> Dissolution report <input type="checkbox"/> Other (specify) _____		Date Hand-delivered or Date Postmarked Receipt # _____ Amount _____	
6 ORIGINAL PERIOD COVERED Month Day Year 07/01/2025		Month Day Year THROUGH 12/31/2025		Date Processed Date Imaged	

7 EXPLANATION OF CORRECTION

I left off a donation card fee for November 2025

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Vicki Highfield

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

**COUNTY EXECUTIVE COMMITTEE
CAMPAIGN FINANCE REPORT**

**FORM CEC
COVER SHEET PG 1**

The CEC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00018800	2 Total pages filed: 101				
3 COMMITTEE NAME Republican Executive Committee of Comal County		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/01/2026 Date Hand-delivered or Date Postmarked Receipt # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged					
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 265 LANDA New Braunfels, TX 78130						
5 CAMPAIGN TREASURER NAME	FIRST Vicki						
	NICKNAME LAST Highfield			SUFFIX			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 1066 Fairway Dr Canyon Lake, TX 78133			APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; 265 Landa Street New Braunfels, TX 78130	APT / SUITE #;	CITY;	STATE;	ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE (830) 255-9155	PHONE NUMBER	EXTENSION				
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15					<input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff	<input type="checkbox"/> Final Report <input type="checkbox"/> 10th day after campaign treasurer termination
10 PERIOD COVERED	Month 07/01/2025	Day	Year	Month 12/31/2025	Day	Year	THROUGH
11 ELECTION	Month 	Day 	Year 	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Runoff <input type="checkbox"/> Special	<input checked="" type="checkbox"/> Other	ELECTION DATE

GO TO PAGE 2

**COUNTY EXECUTIVE COMMITTEE REPORT:
PURPOSE & TOTALS**

**FORM CEC
COVER SHEET PG 2**

12 COMMITTEE NAME Republican Executive Committee of Comal County		13 FILER ID (Ethics Commission Filer) 00018800
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 18,804.76
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 33,836.49
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 154,078.40
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
16 AFFIDAVIT		
<p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.</p> <p style="text-align: right;">_____ Vicki Highfield _____ Signature of Campaign Treasurer</p>		
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.		
_____ Signature of officer administering oath	_____ Printed name of officer administering oath	_____ Title of officer administering oath

SUBTOTALS - CEC**FORM CEC**
COVER SHEET PG 3
4 of 101

17 COMMITTEE NAME Republican Executive Committee of Comal County	18 FILER ID (Ethics Commission Filers) 00018800
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 18,804.76
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 33,836.49
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
10. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/66 Rpt: 5/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Michael	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code San Marcus, TX 78666	
8 Principal occupation / Job title (See Instructions) bank teller		9 Employer (See Instructions)
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Randal	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almanza, Ina	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) broker		Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvis, Farren	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Schertz, TX 78154	
Principal occupation / Job title (See Instructions) stay at home mom		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Mark	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/66 Rpt: 6/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Misty	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code Niederwalt, TX 78640	
8 Principal occupation / Job title (See Instructions) admin tech		9 Employer (See Instructions)
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Archer, Leighton	Amount of Contribution (\$) \$9.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) salesman		Employer (See Instructions)
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, James	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions)
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Lawrence	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Georgetown, TX 78628	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldridge, Jane	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) substitute		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/66 Rpt: 7/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barritt, Christine	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	
8 Principal occupation / Job title (See Instructions) clerk		9 Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barry, Jody	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions)
Date 11/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barry, Jody	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions)
Date 07/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernstein, Paul	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) manager		Employer (See Instructions)
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besselman, Carolyn	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Spring Branch, TX 78070	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/66 Rpt: 8/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besselman, Carolyn	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Spring Branch, TX 78070	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Besselman, Carolyn	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Spring Branch, TX 78070	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Biltjinitis, Velma	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Seguin, TX 78155	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boothe, Amy	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78130	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boothe, Amy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/66 Rpt: 9/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borchers, Robbie 6 Contributor address; City; State; Zip Code New Braunfels, TX 78130	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brace, TJ Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) engineering		Employer (See Instructions)
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, John Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, John Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, John Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/66 Rpt: 10/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, John 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$50.00
	8 Principal occupation / Job title (See Instructions) retired	9 Employer (See Instructions) retired
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brewer, John Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions) retired
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buenteo, Raymond Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$40.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butter, Rita Contributor address; City; State; Zip Code Cibolo, TX 78108	Amount of Contribution (\$) \$75.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions)
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byrne Sr., Gary Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78131	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) retired	Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/66 Rpt: 11/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COMAL COUNTY REP PARTY PRIMARY ACCT 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	7 Amount of Contribution (\$) \$2,209.66
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadsmore, Bryan Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) caregiver		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cady, Christine Contributor address; City; State; Zip Code Converse, TX 78909	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) social worker		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Kirsten Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/66 Rpt: 12/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casarez, Martin	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Schertz, TX 78108	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Abigail	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) office manager		Employer (See Instructions)
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ceh, Steve	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) pastor		Employer (See Instructions)
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, RUTH	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Bulverde, TX 78163	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Ruth	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Bulverde, TX 78163	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 9/66 Rpt: 13/101
2 FILER NAME Republican Executive Committee of Comal County			3 Filer ID (Ethics Commission Filers) 00018800
4 Date 08/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Ruth	7 Amount of Contribution (\$) \$150.00	
	6 Contributor address; City; State; Zip Code Bulverde, TX 78163		
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)	
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Ruth	Amount of Contribution (\$) \$20.00	
	Contributor address; City; State; Zip Code Bulverde, TX 78163		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)	
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Ruth	Amount of Contribution (\$) \$150.00	
	Contributor address; City; State; Zip Code Bulverde, TX 78163		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)	
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Ruth	Amount of Contribution (\$) \$150.00	
	Contributor address; City; State; Zip Code Bulverde, TX 78163		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)	
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Ruth	Amount of Contribution (\$) \$25.00	
	Contributor address; City; State; Zip Code Bulverde, TX 78166		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/66 Rpt: 14/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Ruth	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Bulverde, TX 78166	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Ruth	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Bulverde, TX 78166	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Ruth	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Bulverde, TX 78166	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Ruth	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Bulverde, TX 78166	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheatham, Gloria	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/66 Rpt: 15/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 12/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Tom	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
8 Principal occupation / Job title (See Instructions) judge		9 Employer (See Instructions)
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cochran, Allison	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) amazon		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coffman, LISA	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) regional manager		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooley, William	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) pastor		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Couch, Renee	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) county treasurer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/66 Rpt: 16/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crary, Michael	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Culp, Karla	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Charles	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Universal City, TX 78148	
Principal occupation / Job title (See Instructions) technician		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuvillier, Minerva	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Seguin, TX 78155	
Principal occupation / Job title (See Instructions) realtor		Employer (See Instructions)
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeLaHoya, Lettie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78130	
Principal occupation / Job title (See Instructions) accounting clerk		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/66 Rpt: 17/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeStefano, Emma 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	7 Amount of Contribution (\$) \$79.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denboer, Roxanne Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deviller, Janet Contributor address; City; State; Zip Code Cibolo, TX 78108	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) customer service		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drosche, April Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) nurse		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunham, Deanna Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) administration		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/66 Rpt: 18/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunkin, Betty	7 Amount of Contribution (\$) \$80.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dunlap, Paul	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) homeschool dad		Employer (See Instructions)
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duprat-Waldo, Rita	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78132	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Encina, Edward	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78263	
Principal occupation / Job title (See Instructions) UPS delivery		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Epps, Michelle	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/66 Rpt: 19/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ervin, Gerald	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
8 Principal occupation / Job title (See Instructions) self		9 Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Sandra	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Sandra	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Tara	Amount of Contribution (\$) \$55.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) processor		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewer, Aaron	Amount of Contribution (\$) \$55.00
	Contributor address; City; State; Zip Code C, TX 78133	
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/66 Rpt: 20/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 07/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eybers, Betsy	7 Amount of Contribution (\$) \$70.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eybers, Betsy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZPATRICK, ZOWI	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code CIBOLO, TX 78108	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 11/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FITZPATRICK, ZOWI	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code CIBOLO, TX 78108	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farace, Carolyn	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) bookkeeper		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/66 Rpt: 21/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farris, Bill	7 Amount of Contribution (\$) \$60.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fiedler, Paula	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) realtor		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fogg, Elaine	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) healthcare admin		Employer (See Instructions)
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Formolo, Kevin	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fountain, Helen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) product buyer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/66 Rpt: 22/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeland, Tish 6 Contributor address; City; State; Zip Code San Marcus, TX 78666	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeland, Tish Contributor address; City; State; Zip Code San Marcus, TX 78666	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeland, Tish Contributor address; City; State; Zip Code San Marcus, TX 78666	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freeland, Tish Contributor address; City; State; Zip Code San Marcus, TX 78666	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) analyst		Employer (See Instructions)
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Friends of Donna Campbell Contributor address; City; State; Zip Code Houston, TX 77046	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/66 Rpt: 23/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisk, Belinda	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisk, Belinda	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisk, Belinda	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisk, Belinda	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisk, Belinda	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/66 Rpt: 24/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 12/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisk, Belinda	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fry, Fred	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Marcus, TX 78666	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Liz	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) self		Employer (See Instructions)
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geisel, Dana	Amount of Contribution (\$) \$31.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions)
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbons, Scott	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) insurance		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/66 Rpt: 25/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 12/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilliam, Amy	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
8 Principal occupation / Job title (See Instructions) self employed		9 Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilliam, Austin	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) HEB		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilmore, April	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Seguin, TX 78155	
Principal occupation / Job title (See Instructions) sales		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Joe	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Bulverde, TX 78163	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gracia, Rudy	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78227	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/66 Rpt: 26/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grady, Michael 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) sales		9 Employer (See Instructions)
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Cheryl Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Susan Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Brenna Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) clerk		Employer (See Instructions)
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Madeline Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) non profit		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/66 Rpt: 27/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ham, Lorri Gogo 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) medical technician		9 Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hambrick, Gary NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hambrick, Grace NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanrahan, Shari Austin, TX 78748	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) fundraiser		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanz, Nita NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/66 Rpt: 28/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harman, Christian 6 Contributor address; City; State; Zip Code Spring, TX 77379	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) student		9 Employer (See Instructions)
Date 07/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, David Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) marketing		Employer (See Instructions)
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harry, Courtney Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, KC Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrickson, Judith Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$56.00
Principal occupation / Job title (See Instructions) concierge		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/66 Rpt: 29/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendrickson, Sarah	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Onoway Alberta H0H0H0 Canada	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hendry, Connie	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code San Marcus, TX 78666	
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions)
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensz, Genevieve (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78130	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 08/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensz, Genevieve (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78130	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensz, Genevieve (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78130	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/66 Rpt: 30/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensz, Genevieve (Mrs.)	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code New Braunfels, TX 78130	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) retired
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensz, Genevieve (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78130	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 12/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensz, Genevieve (Mrs.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78130	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) retired
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hepworth, Marie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Blanco, TX 78606	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Yamel	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) server		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/66 Rpt: 31/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herren, Michele	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
8 Principal occupation / Job title (See Instructions) self		9 Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hickingbottom, Charlotte	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) self		Employer (See Instructions)
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Highfield, Albert	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Highfield, Albert	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Highfield, Albert	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/66 Rpt: 32/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Highfield, Vicky	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Highfield, Vicky	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hiles, Marty	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillyer, Gladys	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Bulverde, TX 78163	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Himsel, David	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/66 Rpt: 33/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hinze, Joshua	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
8 Principal occupation / Job title (See Instructions) road department operator		9 Employer (See Instructions) Hays County
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, James	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78247	
Principal occupation / Job title (See Instructions) rural mail carrier		Employer (See Instructions)
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Shelby	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoya, Leticia	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) clerk		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ibarra, Isabel	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/66 Rpt: 34/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivey, Tiffany	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
8 Principal occupation / Job title (See Instructions) technician		9 Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaap, Trevor	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janysek, Brynn	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) vet technician		Employer (See Instructions)
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarvi, Carmella	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez, Ricardo	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/66 Rpt: 35/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez, Rick	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Karen	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jennifer	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) texas state		Employer (See Instructions)
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jorgensen, Ken	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judkins, Barbara	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/66 Rpt: 36/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jupe, Ervin 6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	7 Amount of Contribution (\$) \$25.00
	8 Principal occupation / Job title (See Instructions) retired	
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jupe, Ervin Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) retired	
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jupe, Ervin Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) retired	
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jupe, Ervin Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) retired	
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kastner, Merrie Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$125.00
	Principal occupation / Job title (See Instructions) retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/66 Rpt: 37/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kastner, Merrie	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keel, Michael	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78132	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Robert	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Dublin, TX 76446	
Principal occupation / Job title (See Instructions) retail		Employer (See Instructions)
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kesselring, Dawn	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions)
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kight, Lois	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/66 Rpt: 38/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knaggs, Janelle	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code Schertz, TX 78108	
8 Principal occupation / Job title (See Instructions) homemaker		9 Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krause, Pam	Amount of Contribution (\$) \$95.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions)
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krause, Pam	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) accountant		Employer (See Instructions)
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaFranchise, Richard	Amount of Contribution (\$) \$53.00
	Contributor address; City; State; Zip Code Bulverde, TX 78163	
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions)
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laffin, John	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/66 Rpt: 39/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Land, Larry 6 Contributor address; City; State; Zip Code Canyon Lake, TX 78133	7 Amount of Contribution (\$) \$200.00
	8 Principal occupation / Job title (See Instructions) retired	
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Land, Larry Contributor address; City; State; Zip Code Canyon Lake, TX 78133	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) retired	
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lange, Linda Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Retired	
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Donna Contributor address; City; State; Zip Code Canyon Lake, TX 78133	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) retired	
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Donna Contributor address; City; State; Zip Code Canyon Lake, TX 78133	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) retired	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/66 Rpt: 40/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Donna 6 Contributor address; City; State; Zip Code Canyon Lake, TX 78133	7 Amount of Contribution (\$) \$100.00
	8 Principal occupation / Job title (See Instructions) retired	
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leimbach, Debbie Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) chair	
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lemme, Amanda Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$100.00
	Principal occupation / Job title (See Instructions) sales	
Date 11/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger, Heather Contributor address; City; State; Zip Code Martindale, TX 78655	Amount of Contribution (\$) \$20.00
	Principal occupation / Job title (See Instructions) counselor	
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loney, Jennifer Contributor address; City; State; Zip Code Bulverde, TX 78163	Amount of Contribution (\$) \$25.00
	Principal occupation / Job title (See Instructions) sales	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/66 Rpt: 41/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Louthen, Vickie	7 Amount of Contribution (\$) \$77.00
	6 Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Louthen, Vickie	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code CANYON LAKE, TX 78133	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lueck, Brian	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Seguin, TX 78155	
Principal occupation / Job title (See Instructions) cremation		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luevano, Jorge	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Cibolo, TX 78108	
Principal occupation / Job title (See Instructions) self		Employer (See Instructions)
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCGOWEN, DENNIS	Amount of Contribution (\$) \$29.00
	Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/66 Rpt: 42/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallory, Stephanie	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
8 Principal occupation / Job title (See Instructions) sales		9 Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mann, Cassandra	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) lending Assistant		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marchant, Robert	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Wimberly, TX 78676	
Principal occupation / Job title (See Instructions) sales		Employer (See Instructions)
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marroquin, Pam	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maurer, Michael	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/66 Rpt: 43/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 12/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfield, Ricky	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCoy, Patti	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKeenan, Erica	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78133	
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meckel, Linda	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) self		Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mello, Lawrence	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/66 Rpt: 44/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mercer, Marcela	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code Seguin, TX 78155	
8 Principal occupation / Job title (See Instructions) teacher		9 Employer (See Instructions)
Date 07/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mezik Jr., Thomas	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mezik Jr., Thomas	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mezik Jr., Thomas	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michelson, Bryan	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) server		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/66 Rpt: 45/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Middleton, Delinda	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minus, Steve	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) rancher		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Charles	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Wimberly, TX 78676	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Cherie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) caregiver		Employer (See Instructions)
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Mitch	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) signs		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/66 Rpt: 46/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Suzane	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mongold, Jodie	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monroe, Christy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) caregiver		Employer (See Instructions)
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monteros, Maria	Amount of Contribution (\$) \$51.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreau, Sharon	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/66 Rpt: 47/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moreno, Sofia	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
8 Principal occupation / Job title (See Instructions) realtor		9 Employer (See Instructions)
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Ginger	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Marcus, TX 78666	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morris, Chris	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Cibolo, TX 78108	
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 10/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosegard, Mary	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78130	
Principal occupation / Job title (See Instructions) medical		Employer (See Instructions)
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mowery, Marsha	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/66 Rpt: 48/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Carrie	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
8 Principal occupation / Job title (See Instructions) owner		9 Employer (See Instructions) Wichita Reds Bar
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Musto, Jackie	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NOVISKIE, GLENN	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code KATY, TX 77450	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naumann, Elizabeth	Amount of Contribution (\$) \$55.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neely, Richard	Amount of Contribution (\$) \$80.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/66 Rpt: 49/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nowotny, Jamie	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PDFFILLER	Amount of Contribution (\$) \$144.00
	Contributor address; City; State; Zip Code Brookline, MA 02445	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Para, Craig	Amount of Contribution (\$) \$95.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrish, Kayne	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) firefighter		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pasco, Tanya	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/66 Rpt: 50/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pasco, Tanya	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patrick, Steven	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) peace officer		Employer (See Instructions)
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena-Cruz, Milton	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Marion, TX 78124	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Kathy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Bulverde, TX 78163	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 08/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Kathy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Bulverde, TX 78163	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/66 Rpt: 51/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Kathy	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Bulverde, TX 78163	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Kathy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Bulverde, TX 78163	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Kathy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Bulverde, TX 78163	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Kathy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Bulverde, TX 78163	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Kathy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Bulverde, TX 78163	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/66 Rpt: 52/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Robert	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Bulverde, TX 78163	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Robert	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Bulverde, TX 78163	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Power, Loney	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Fischer, TX 78623	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pruett, Brigitte	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pryor, Lance	Amount of Contribution (\$) \$95.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) mechanic		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/66 Rpt: 53/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pryor, Lance	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
8 Principal occupation / Job title (See Instructions) mechanic		9 Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinters, Tammy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code San Antonio, TX 78218	
Principal occupation / Job title (See Instructions) clerical		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROWLANDS, LEIGH ANN	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramien, Danielle	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Marcus, TX 78666	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramos, Tara	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) NBISD		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/66 Rpt: 54/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Kimberly	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Kimberly	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rawson, Rick	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Mesquite, NV 89024	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, Julia	Amount of Contribution (\$) \$28.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) waitress		Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Leslie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) stay at home mom		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/66 Rpt: 55/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riensch, Dakotah 6 Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) sales		9 Employer (See Instructions)
Date 09/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rincon, Reyes Contributor address; City; State; Zip Code New Braunfels, TX 78130	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rios, Lorena Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Robert Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) sales management		Employer (See Instructions)
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronquillo, Lorraine Contributor address; City; State; Zip Code Bulverde, TX 78163	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/66 Rpt: 56/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 12/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Karen	7 Amount of Contribution (\$) \$77.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
8 Principal occupation / Job title (See Instructions) unemployed		9 Employer (See Instructions)
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowlands, Craig	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) toxicologist		Employer (See Instructions)
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SPAETH, DANNY	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUFELS, TX 78132	
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, Lindsey	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code San Antonio, TX 78233	
Principal occupation / Job title (See Instructions) clerical		Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santoro, Janet	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/66 Rpt: 57/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scantling, Cindy	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scantling, Cindy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scantling, Cindy	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Merrie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Merrie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/66 Rpt: 58/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/14/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Senter, Edward	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
8 Principal occupation / Job title (See Instructions) chef		9 Employer (See Instructions)
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shook, Tim	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shook, Tim	Amount of Contribution (\$) \$70.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sigman, Marilyn	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims, Dwight	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) corrections officer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/66 Rpt: 59/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 12/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sisk, Kaci	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sisk, Lindy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Spring Branch, TX 78070	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, David	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions)
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Tammy	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) dog groomer		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soto, Angielee	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code San Antonio, TX 78209	
Principal occupation / Job title (See Instructions) manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/66 Rpt: 60/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spahn, Jennifer	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
8 Principal occupation / Job title (See Instructions) locator		9 Employer (See Instructions)
Date 10/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprayue, Janet	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) realtor		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanislaw, James	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) paramedic		Employer (See Instructions)
Date 10/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stokes, Greg	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strack, Robert	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78132	
Principal occupation / Job title (See Instructions) self employed		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/66 Rpt: 61/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sudwischer, Zach	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
8 Principal occupation / Job title (See Instructions) technician		9 Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Teri	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompkins, Kenneth	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, LaFawn	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78130	
Principal occupation / Job title (See Instructions) administrative assistant		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsley, Rebecca	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/66 Rpt: 62/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troncoso, Manuel	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
8 Principal occupation / Job title (See Instructions) public works		9 Employer (See Instructions)
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Troncoso, Tera	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tuckness, Alice	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Comal ISD
Date 10/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Robert	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Utley, Jennifer	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) admin		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/66 Rpt: 63/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Anita	7 Amount of Contribution (\$) \$90.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Anita	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Anita	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Anita	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Emanuel	Amount of Contribution (\$) \$150.10
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/66 Rpt: 64/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 08/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanHeldorf, Paul	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code New Braunfels, TX 78132	
8 Principal occupation / Job title (See Instructions) MASSUSE		9 Employer (See Instructions)
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanHeldorf, Paul	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanHeldorf, Paul	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanHeldorf, Paul	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanHeldorf, Paul	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/66 Rpt: 65/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vovanowski, Ace 6 Contributor address; City; State; Zip Code Georgetown, TX 78628	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) dentist		9 Employer (See Instructions)
Date 09/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Susan Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Susan Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Susan Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker Jr., Dale Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/66 Rpt: 66/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walser, Forrest	7 Amount of Contribution (\$) \$35.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ward, Lee	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Bea	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weber, Bruce	Amount of Contribution (\$) \$310.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weidner, Ashlee	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	
Principal occupation / Job title (See Instructions) office manager		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/66 Rpt: 67/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Scott	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
8 Principal occupation / Job title (See Instructions) director		9 Employer (See Instructions)
Date 11/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Robert	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Westgate, James	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Michael	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Boerne, TX 78006	
Principal occupation / Job title (See Instructions) self employee		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheeler, Mike	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Boerne, TX 78006	
Principal occupation / Job title (See Instructions) self		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/66 Rpt: 68/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Jessica 6 Contributor address; City; State; Zip Code Lockhart, TX 78644	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) stay at home mom		9 Employer (See Instructions)
Date 09/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitehead, Ginger Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$28.00
Principal occupation / Job title (See Instructions) self		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitehead, Mary Kristine Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) farmer		Employer (See Instructions)
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiedenfeld, Sharon Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Gwen Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/66 Rpt: 69/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willmington, Misty	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
8 Principal occupation / Job title (See Instructions) stay at home mom		9 Employer (See Instructions)
Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Mary	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 12/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Mary	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wissmiller, Cynthia	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 11/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Doris	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code McQueeny, TX 78123	
Principal occupation / Job title (See Instructions) HEB market		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/66 Rpt: 70/101
2 FILER NAME Republican Executive Committee of Comal County		3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, James	7 Amount of Contribution (\$) \$105.00
	6 Contributor address; City; State; Zip Code SPRING BRANCH, TX 78070	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yandle, Tammy	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions)
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yoe, John	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code New Braunfels, TX 78132	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 09/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zaiontz, Jeanette	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130	
Principal occupation / Job title (See Instructions) management		Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/31 Rpt: 71/101	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/30/2025	5 Payee name AT HOME	
6 Amount (\$) \$24.35	7 Payee address; City; State; Zip Code 642 S WALNUT NEW BRUANFELS, TX 78130	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense entrance rug
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/24/2025	Payee name Bitdefender Ultimate Security	
Amount (\$) \$97.19	Payee address; City; State; Zip Code 111 W. Houston St ste 2105 San Antonio, TX 78205	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense computer security
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/07/2025	Payee name Bremer Management LLC	
Amount (\$) \$2,400.00	Payee address; City; State; Zip Code 267 Landa St New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense space rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/31 Rpt: 72/101	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 08/05/2025	5 Payee name Bremer Management LLC	
6 Amount (\$) \$2,400.00	7 Payee address; City; 267 Landa St New Braunfels, TX 78130	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office space rent
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/04/2025	Payee name Bremer Management LLC	
Amount (\$) \$2,400.00	Payee address; City; 267 Landa St New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office space rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Bremer Management LLC	
Amount (\$) \$2,400.00	Payee address; City; 267 Landa St New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/31 Rpt: 73/101	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/04/2025	5 Payee name Bremer Management LLC	
6 Amount (\$) \$2,400.00	7 Payee address; City; 267 Landa St New Braunfels, TX 78130	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office space rental
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/04/2025	Payee name Bremer Management LLC	
Amount (\$) \$2,400.00	Payee address; City; 267 Landa St New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office space rent
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/11/2025	Payee name CONSTANT CONTACT	
Amount (\$) \$3,044.52	Payee address; City; 1601 TRAPELO RD S 329 WATLHAM, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense annual expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/31 Rpt: 74/101	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 07/16/2025	5 Payee name City of New Braunfels	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code P.O. Box 140457 Irving, TX 75014	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense alarm permit
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name HEB	
Amount (\$) \$52.88	Payee address; City; State; Zip Code 1655 Hwy 46 W New Braunfels, TX 78132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense plants and potting soil for outside office
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/26/2025	Payee name HEB	
Amount (\$) \$102.56	Payee address; City; State; Zip Code 1655 Hwy 46 W New Braunfels, TX 78132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense drinks and snacks for pct training
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/31 Rpt: 75/101	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 12/01/2025	5 Payee name HEB	
6 Amount (\$) \$76.81	7 Payee address; City; State; Zip Code 1655 Hwy 46 W New Braunfels, TX 78132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Pct Chair training
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/30/2025	Payee name HEB	
Amount (\$) \$53.82	Payee address; City; State; Zip Code 1655 Hwy 46 W New Braunfels, TX 78132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense kleenex, paper towels, tissue
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/01/2025	Payee name Hampton Inn	
Amount (\$) \$144.50	Payee address; City; State; Zip Code 575 State Hwy 46 S New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense room for Kathy Phillips
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/31 Rpt: 76/101	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/23/2025	5 Payee name Highfield, Vicky	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1066 Fairway Dr Canyon Lake, TX 78133	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense petty cash
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/27/2025	Payee name Hill Country Carpet Cleaning	
Amount (\$) \$245.00	Payee address; City; State; Zip Code 1021 River Rock New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cleaned office carpet
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/04/2025	Payee name Jackson, Troy	
Amount (\$) \$150.00	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Fort Worth, TX 76132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense pct chair training
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/31 Rpt: 77/101	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 12/18/2025	5 Payee name Lowes Market	
6 Amount (\$) \$10.47	7 Payee address; City; State; Zip Code PO Box 1325 Canyon Lake, TX 78133	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense water for office
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/07/2025	Payee name Microsoft Store	
Amount (\$) \$108.24	Payee address; City; State; Zip Code One Microsoft Way Redmond , WA 98052	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense word software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/18/2025	Payee name NBU	
Amount (\$) \$306.70	Payee address; City; State; Zip Code 263 Main Plaza New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office utilities
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/31 Rpt: 78/101	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 08/18/2025	5 Payee name NBU	
6 Amount (\$) \$328.11	7 Payee address; City; State; Zip Code 263 Main Plaza New Braunfels, TX 78130	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense utilities
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name NBU	
Amount (\$) \$340.60	Payee address; City; State; Zip Code 263 Main Plaza New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense utilities
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/20/2025	Payee name NBU	
Amount (\$) \$345.80	Payee address; City; State; Zip Code 263 Main Plaza New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense utilities
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/31 Rpt: 79/101	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/18/2025	5 Payee name NBU	
6 Amount (\$) \$300.54	7 Payee address; City; State; Zip Code 263 Main Plaza New Braunfels, TX 78130	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense utilities
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/18/2025	Payee name NBU	
Amount (\$) \$238.44	Payee address; City; State; Zip Code 263 Main Plaza New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense utilities
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/03/2025	Payee name Office Depot	
Amount (\$) \$357.20	Payee address; City; State; Zip Code 1050 N I35 #800 New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office chair & filing cabinet
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/12/2025	5 Payee name Office Depot	
6 Amount (\$) \$102.65	7 Payee address; City; State; Zip Code 1050 N I35 #800 New Braunfels, TX 78130	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copy paper
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 12/23/2025	Payee name Office Depot	
Amount (\$) \$30.30	Payee address; City; State; Zip Code 1050 N I35 #800 New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copy paper
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 07/07/2025	Payee name PDFFILLER	
Amount (\$) \$144.00	Payee address; City; State; Zip Code 17 Station St 3rd Floor Brookline, MA 02445	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online document organizer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 08/25/2025	5 Payee name PYE BARKER FIRE & SAFETY	
6 Amount (\$) \$155.00	7 Payee address; City; State; Zip Code PO Box 735358 Dallas, CA 75373	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fire extinguishers inspection
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/14/2025	Payee name Petals To Go	
Amount (\$) \$113.00	Payee address; City; State; Zip Code 1847 TX 46 Suite H NEW BRAUNFELS, TX 78132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sympathy flowers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/31/2025	Payee name Raise The Money	
Amount (\$) \$12.46	Payee address; City; State; Zip Code P.O. Box 26466 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 08/29/2025	5 Payee name Raise The Money	
6 Amount (\$) \$12.46	7 Payee address; City; P.O. Box 26466 Little Rock, AR 72221	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/18/2025	Payee name Raise The Money	
Amount (\$) \$12.46	Payee address; City; P.O. Box 26466 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/18/2025	Payee name Raise The Money	
Amount (\$) \$12.46	Payee address; City; P.O. Box 26466 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/18/2025	5 Payee name Raise The Money	
6 Amount (\$) \$12.46	7 Payee address; City; P.O. Box 26466 Little Rock, AR 72221	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name Raise The Money	
Amount (\$) \$12.46	Payee address; City; P.O. Box 26466 Little Rock, AR 72221	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/06/2025	Payee name Rowlands, Leigh Ann	
Amount (\$) \$83.26	Payee address; City; 922 Enclave Trl NEW BRAUNFELS, TX 78132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement for wrist bands and sandwiches for secret service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/25/2025	5 Payee name SIGNUPGENIUS	
6 Amount (\$) \$107.89	7 Payee address; City; State; Zip Code 88 EASTERN AVE SOMMERVILLE, NJ 08876	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense computer program
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/07/2025	Payee name Spectrum	
Amount (\$) \$204.17	Payee address; City; State; Zip Code 4145 S Falkenburg Rd Riverview , FL 33578	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone/wifi
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/04/2025	Payee name Spectrum	
Amount (\$) \$204.17	Payee address; City; State; Zip Code 4145 S Falkenburg Rd Riverview , FL 33578	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone, wifi
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/04/2025	5 Payee name Spectrum	
6 Amount (\$) \$204.17	7 Payee address; City; 4145 S Falkenburg Rd Riverview , FL 33578	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone, wifi
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name Spectrum	
Amount (\$) \$204.17	Payee address; City; 4145 S Falkenburg Rd Riverview , FL 33578	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone, wifi
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/04/2025	Payee name Spectrum	
Amount (\$) \$204.17	Payee address; City; 4145 S Falkenburg Rd Riverview , FL 33578	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone, Wifi
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 12/04/2025	5 Payee name Spectrum	
6 Amount (\$) \$204.17	7 Payee address; City; State; Zip Code 4145 S Falkenburg Rd Riverview , FL 33578	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone/wifi
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/31/2025	Payee name Square,Inc	
Amount (\$) \$5.46	Payee address; City; State; Zip Code 1455 Market ST. Suite 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/30/2025	Payee name Square,Inc	
Amount (\$) \$77.98	Payee address; City; State; Zip Code 1455 Market ST. Suite 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/31/2025	5 Payee name Square,Inc	
6 Amount (\$) \$106.24	7 Payee address; City; State; Zip Code 1455 Market ST. Suite 600 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name Square,Inc	
Amount (\$) \$18.74	Payee address; City; State; Zip Code 1455 Market ST. Suite 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/31/2025	Payee name Square,Inc	
Amount (\$) \$0.80	Payee address; City; State; Zip Code 1455 Market ST. Suite 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation card fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/30/2025	5 Payee name Square, Inc	
6 Amount (\$) \$45.33	7 Payee address; City; State; Zip Code 1455 Market ST. Suite 600 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation card fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Star Awards	Office sought Office held
Date 09/02/2025	Payee name Star Awards	
Amount (\$) \$69.00	Payee address; City; State; Zip Code 1500 IH 35 South New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense name badges
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Star Awards	Office sought Office held
Date 09/15/2025	Payee name Star Awards	
Amount (\$) \$51.50	Payee address; City; State; Zip Code 1500 IH 35 South New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense name badge, texas plaque
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Star Awards	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/03/2025	5 Payee name Star Awards	
6 Amount (\$) \$69.00	7 Payee address; City; State; Zip Code 1500 IH 35 South New Braunfels, TX 78130	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense name badges
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/08/2025	Payee name Star Awards	
Amount (\$) \$57.50	Payee address; City; State; Zip Code 1500 IH 35 South New Braunfels, TX 78130	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense name badges
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/04/2025	Payee name State Farm Insurance	
Amount (\$) \$407.14	Payee address; City; State; Zip Code P.O. Box 2915 Bloomington, IL 61702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense insurance
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 07/31/2025	5 Payee name Stripe	
6 Amount (\$) \$1.75	7 Payee address; City; 354 Oyster Point Blvd San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/30/2025	Payee name Stripe	
Amount (\$) \$1.75	Payee address; City; 354 Oyster Point Blvd San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense card fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/31/2025	Payee name Stripe	
Amount (\$) \$1.75	Payee address; City; 354 Oyster Point Blvd San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense card fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/23/2025	5 Payee name Stripe	
6 Amount (\$) \$1.75	7 Payee address; City; 354 Oyster Point Blvd San Francisco, CA 94080	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense card fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/31/2025	Payee name Stripe	
Amount (\$) \$1.75	Payee address; City; 354 Oyster Point Blvd San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation card fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/31/2025	Payee name Stripe	
Amount (\$) \$1.75	Payee address; City; 354 Oyster Point Blvd San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense donation card fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/17/2025	5 Payee name The Maga Mall	
6 Amount (\$) \$1,234.17	7 Payee address; City; State; Zip Code 4480 Delancey Dr. Ste 14 Las Vegas, NV 89103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense caps, t-shirts
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/30/2025	Payee name The Maga Mall	
Amount (\$) \$999.18	Payee address; City; State; Zip Code 4480 Delancey Dr. Ste 14 Las Vegas, NV 89103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense t-shirts, hats
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/30/2025	Payee name The Maga Mall	
Amount (\$) \$695.32	Payee address; City; State; Zip Code 4480 Delancey Dr. Ste 14 Las Vegas, NV 89103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense t-shirts
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/01/2025	5 Payee name The Maga Mall	
6 Amount (\$) \$341.70	7 Payee address; City; State; Zip Code 4480 Delancey Dr. Ste 14 Las Vegas, NV 89103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense t-shirts, hats
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/08/2025	Payee name The Maga Mall	
Amount (\$) \$335.33	Payee address; City; State; Zip Code 4480 Delancey Dr. Ste 14 Las Vegas, NV 89103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense t-shirts, hats
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/15/2025	Payee name The Maga Mall	
Amount (\$) \$68.97	Payee address; City; State; Zip Code 4480 Delancey Dr. Ste 14 Las Vegas, NV 89103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense caps
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 24/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 10/30/2025	5 Payee name The Maga Mall	
6 Amount (\$) \$851.18	7 Payee address; City; State; Zip Code 4480 Delancey Dr. Ste 14 Las Vegas, NV 89103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense t-shirts, hats
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/30/2025	Payee name The Maga Mall	
Amount (\$) \$962.64	Payee address; City; State; Zip Code 4480 Delancey Dr. Ste 14 Las Vegas, NV 89103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense t-shirts, hats
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/11/2025	Payee name The Maga Mall	
Amount (\$) \$320.55	Payee address; City; State; Zip Code 4480 Delancey Dr. Ste 14 Las Vegas, NV 89103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense t-shirts
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 25/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 12/03/2025	5 Payee name Tracker Security LLC	
6 Amount (\$) \$24.95	7 Payee address; City; 8015 River Road New Braunfels, TX 78132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense security for office
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/26/2025	Payee name Tracker Security LLC	
Amount (\$) \$24.95	Payee address; City; 8015 River Road New Braunfels, TX 78132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense security
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/14/2025	Payee name United States Postal Service	
Amount (\$) \$15.60	Payee address; City; Postmaster New Braunfels, TX 78131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage stamps
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 26/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 07/02/2025	5 Payee name WEBFILE	
6 Amount (\$) \$906.00	7 Payee address; City; State; Zip Code 1000 CONGRESS AUSTIN, TX 78447	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sales tax
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/14/2025	Payee name WEBFILE	
Amount (\$) \$23.97	Payee address; City; State; Zip Code 1000 CONGRESS AUSTIN, TX 78447	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense july sales tax
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/14/2025	Payee name WEBFILE	
Amount (\$) \$64.68	Payee address; City; State; Zip Code 1000 CONGRESS AUSTIN, TX 78447	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense april sales tax
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 27/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 08/14/2025	5 Payee name WEBFILE	
6 Amount (\$) \$1,046.44	7 Payee address; City; State; Zip Code 1000 CONGRESS AUSTIN, TX 78447	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense may sales tax
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/05/2025	Payee name WEBFILE	
Amount (\$) \$1.89	Payee address; City; State; Zip Code 1000 CONGRESS AUSTIN, TX 78447	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sales tax
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name WEBFILE	
Amount (\$) \$269.82	Payee address; City; State; Zip Code 1000 CONGRESS AUSTIN, TX 78447	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sales tax
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 28/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/04/2025	5 Payee name WEBFILE	
6 Amount (\$) \$380.64	7 Payee address; City; State; Zip Code 1000 CONGRESS AUSTIN, TX 78447	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sales tax
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/03/2025	Payee name WEBFILE	
Amount (\$) \$171.65	Payee address; City; State; Zip Code 1000 CONGRESS AUSTIN, TX 78447	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense sales tax
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/24/2025	Payee name Walmart	
Amount (\$) \$177.53	Payee address; City; State; Zip Code 305 Singing Oaks Spring Branch, TX 78070	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense shredder
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 29/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 11/10/2025	5 Payee name Walmart	
6 Amount (\$) \$116.53	7 Payee address; City; State; Zip Code 305 Singing Oaks Spring Branch, TX 78070	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense office supplies pens, paper, trash bags, push pins, cleaners
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 07/07/2025	Payee name XEROX	
Amount (\$) \$95.00	Payee address; City; State; Zip Code PO BOX 205354 DALLAS, TX 75320	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copy machine rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/05/2025	Payee name XEROX	
Amount (\$) \$95.00	Payee address; City; State; Zip Code PO BOX 205354 DALLAS, TX 75320	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copy machine rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 30/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800
4 Date 09/04/2025	5 Payee name XEROX	
6 Amount (\$) \$95.00	7 Payee address; City; State; Zip Code PO BOX 205354 DALLAS, TX 75320	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copy machine rental
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 10/06/2025	Payee name XEROX	
Amount (\$) \$95.00	Payee address; City; State; Zip Code PO BOX 205354 DALLAS, TX 75320	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copy machine rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/04/2025	Payee name XEROX	
Amount (\$) \$95.00	Payee address; City; State; Zip Code PO BOX 205354 DALLAS, TX 75320	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copier rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 31/31 Rpt:	2 FILER NAME Republican Executive Committee of Comal County	3 Filer ID (Ethics Commission Filers) 00018800	
4 Date 12/04/2025	5 Payee name XEROX		
6 Amount (\$) \$95.00	7 Payee address; City; State; Zip Code PO BOX 205354 DALLAS, TX 75320		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense copy machine rental	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held